Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

		CLAIM	S AS FIL (Columi		Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
FOR		N	JMBER FIL	LED	NUMBER	EXTRA	R	ATE	FEE	1	RATE	FEE
BASIC FEE								V.	380.00	OR		760.00
TOTAL CLAIMS			[(n	ninus 20=	*		×	\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			) , ,	minus 3 =	*		×	(39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT							130=		OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2							OTAL		OR	TOTAL	760	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER SMALL I	
AMENDMENT A		CLAIM REMAIN AFTE AMENDM	IS ING R		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	٠ )	Minus	S ***	. 20	= 7	×	\$ 9=		OR	X\$18=	26
	Independent FIRST PRESE	* "	Minu:			=	×	39=		OR	X78=	
	FIRST PRESE	ENTATION	OF MULTIPL	LE DEPEN	IDENT CLAIN	<u> </u>	+1	30=		OR	+260=	
								TOTAL T. FEE		OR	TOTAL ADDIT, FEE	226
	KCE	(Colum	n 1)	(	Column 2)	(Column 3)						
AMENDMENT B		CLAIM REMAIN AFTE AMENDM	ING R	F	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 2	6 Minus		27	=	X	9=		OR	X\$18= .	
	Independent	* C	Minus	<u></u>	DENT CLAIN	=	X	39=		OR	X78=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	30=		OR	+260=	
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE	
	·	(Columi		(	Column 2)	(Column 3)						
AMENDMENT C		CLAIM REMAIN AFTEI AMENDM	NG R	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	R/	ATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 20	Minus	**	27	=	X	9=		OR	X\$18=	
	Independent	*	Minus			= /	X	39=		OR	X78=	
	FIRST PRESE	NTATION (	OF MULTIPL	E DEPEN	DENT CLAIN		$\vdash$					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								30= 		OR	+260=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num	nber Previous	sly Paid For" (	Total or Inde	ependent) is th	e highest numbe	r found in	the ap	propriate box	k in col	umn 1.	